

**Institute of Tai Chi Arts, ITCA** <http://itcadc.org> R3

**Class Registration (2024 Spring Program)** 1/28/2024 to 6/9/2024

Always check with your doctor before taking any exercise classes.

Question & Contact: [Meihwataichi@gmail.com](mailto:Meihwataichi@gmail.com)

**Name:** (First) \_\_\_\_\_ (Last) \_\_\_\_\_ (Mr.; Ms.; Mrs.)

**E-mail address:** \_\_\_\_\_ and phone # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Program description:**

TO encourage each other with regular Tai-Chi, a complementary **ITCA Polo Shirt**, a gift from Mr. & Mrs. Wu, will be distributed to each participant in the coming spring program (at the Chinese New Year Party on 2/18/2024).

**Location:** Cafeteria in Richard Montgomery High School. Mask is optional but recommended.

Weekly Sunday afternoon (except holidays)

- Tai Chi basic movement and warm-up: 2:00 to 2:45pm. Two options:
  - Warmup with Basic movement (suitable for beginners)
  - Warmup with selective forms (in-depth exploration).
- Training class (five groups): 3:00 to 4:00pm.
  - Yang and Cheng Man Ching styles, Step by step teaching bilingual.  
**Please check one.** Class description can be found at ITCA web site.
  - A1. Introduction for beginner    A2. Tai Chi short form
  - B. Tai Chi Long form            C. Tai Chi sword            D. Combination class

**User fee** \$45 per participant. No charge for spouse to encourage family participation.

Additional amount (optional) as donation is heartily appreciated, ITCA is a non-profit organization. Please write check payable to “ **ITCA** ” with your Full Name for our record. Give us your registration and check on the first day of class. Thank you.

**Liability: Please complete the form for EACH registration**

“I, the undersigned, have been informed and understand that there are potential risk and body damage, when I participate the in-person Tai Chi practice. I further understand that COVID-19 is contagious and I could be infected from participating the class activities. With the signature signed below, I hereby waive ITCA and its participants from all class related liability “.

My name (First, Last): \_\_\_\_\_

My Signature: \_\_\_\_\_ Date: \_\_\_\_\_